

THE COMMUNITY CARE LICENSING DIVISION'S

Quarterly Update SPRING 2018

ADULT and SENIOR CARE PROGRAM UPDATE

Mission: To optimize the health and safety of adults and seniors in community care settings.

The Adult and Senior Care Residential Licensing Program licenses Adult Day Programs (ADP), Adult Residential Facilities (ARF), Adult Residential Care Facilities for Persons with Special Healthcare Needs (ARFPSHN), Enhanced Behavioral Supports Homes (EBSH), Community Crisis Homes (CCH), Residential Care Facilities for the Chronically III (RCFCI), Residential Care Facilities for the Elderly (RCFE), and Social Rehabilitation Facilities (SRF) in an effort to ensure that they provide a safe and healthy environment for all persons in care.

A Note from Pamela Dickfoss, Deputy Director

The Community Care Licensing, Adult and Senior Care Program (ASCP), has created the Staff Development and Compliance Unit to help foster an employee driven, resident centered training program. An annual needs assessment is completed by the field and the results are the foundation of the annual training plan. The training plan is presented to the Training and Education Counsel (TEC), an internal stakeholder group made up of licensing program analysts, management, and Program Clinical Consultants. The role of the TEC is to assist the Staff Development and Compliance Unit in creating consistent, sustainable, and relevant trainings for ASCP field staff and to ensure training content remains up-to-date, constantly improving, and adaptable to the evolving needs of the industry.

The ASCP, Centralized Application Bureau (CAB) has also established an internal training and development plan for the onboarding and continuous training of the CAB staff. Training includes modules that cross over with field staff to ensure consistency and efficiency in the application process. Three internal committees have been established to focus on communication, streamlining business

processes and tools, and Staff Training and Development.

Staff Training and Development continues to be a priority as part of continuous quality improvement efforts. New members are being appointed to the internal Training Council and this year's goals include coordinating with the Central Training Section to implement an online training system, creating standardized LPA Academy lesson plans and incorporating hands on experience during program specific training for the LPAs. The new on-line training management system provides position-specific trainings for LPAs. This system consists of a variety of learning modules organized into lesson plans that can be customized for each position. In addition to providing job relevant training, the training management system allows staff to take convenient 10 to 15-minute refresher trainings. This is not a replacement to classroom learning, but rather a new and exciting tool we look forward to using as a supplement to the traditional training methods. In person and instructor led training will continue throughout the Regional Offices and during the LPA Academy.

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Community Crisis Homes Regulations Update

We are pleased to announce that the California Code of Regulations, Title 22, Division 6, Chapter 6.1
Community Crisis Homes
has been formally adopted. These regulations had originally been published on September 18, 2017 as emergency regulations and have since completed the regular rulemaking process with the Office of Administrative Law. For a general overview of the regulations, please see PIN 17-08-ASC.

Fire Clearances

All facilities licensed by CCL must obtain a fire clearance. There are three different levels of fire clearance:

- Ambulatory
- Non-Ambulatory
- Bedridden

The facility can have a combination of any of these up to the capacity of the facility. Licensees must ensure they have the proper fire clearance for the status of the residents in their care. If a resident has a change in status that is above the current fire clearance a new fire clearance must be obtained. Having a hospice waiver does not automatically give you a bedridden fire clearance.

The following regulations address fire clearances:

• RCFE <u>87202, 87606(c), 87608(a)(4), 87633(l), 87705(c)</u>

• ARF 80020, 80028(b)(1), 80072(a)(8)(D), 80077.3(a)(3)(B), 85375(a)(2)

• ADP 82020, 82028(b)(1), 82087.5(a)(2)

CCH
 80020, 80028(b)(1), 80072(a)(8)(D), 80077.3(a)(3)(B), 85120
 EBSH
 80020, 80028(b)(1), 80072(a)(8)(D), 80077.3(a)(3)(B), 89920

• RCFCI <u>87820, 87828, 87906</u>

• SRF 81020, 81028, 81072(a)(8)(D)

ARFPSHN¹ 80020, 80028(b)(1), 80072(a)(8)(D), 80077.3(a)(3)(B)

The use of any delayed egress or locked perimeters requires approval from the fire department.

¹ Also see Welfare and Institutions Code Section <u>4684.53(g)</u>.



Nurse Consultant's Corner – Principles of Documentation

During the annual inspection or complaint investigation, Adult and Senior Care Program Licensing Program Analysts (LPAs) are required to use their knowledge, skills and abilities to gather all information necessary to determine if the facility meets the licensing requirements.

The LPAs document their findings to justify the determination of noncompliance with licensing requirements. The Principles of Documentation (POD) components in Principle #3 are used as a formal method of giving the licensee the information about what was wrong and why the regulation or statute was not met. It is also an official record and legal document, and will be made available to the public upon request.

Listed below is a summary of the POD components in Principle #3 to be considered in the development and completion of the documentation of deficiencies.

A deficiency consists of three components:

- A. The language from that regulation or statute which specifies the aspect(s) of the requirement with which the licensee was noncompliant and an explicit statement that the requirement was "not met".
- B. A deficient practice statement, which includes:
 - The source(s) of the information through which the evidence was obtained;

- A brief (1-2 sentence) statement that summarizes the action or lack of action by the licensee, that resulted in the noncompliance with the regulation or statute;
- A description of the extent of the deficient practice or the number of deficient cases relative to the total number of such cases (if applicable);
- 4. The identifier of the individuals or situations referenced in the extent of the deficient practice; and
- The level of risk; Type A- poses an immediate Health, Safety or Personal Rights risk to residents in care or Type B- poses/posed a potential Health, Safety or Personal Rights risk to residents in care.
- C. The facts and findings relevant to the deficient practice, answer the questions: who, what, where, when and how. They illustrate the licensee's noncompliance with the requirement.

The LPA must be sure the cited deficiencies relate to the regulatory or statutory requirements. In addition, it is necessary for the LPA to write clear and comprehensively to give the licensee the information necessary to enable them to analyze the problems, define appropriate corrective action, write an effective plan of correction, and come into compliance with the requirements.

References:

 CDSS, CCL ASCP Principles of Documentation 7/31/17

Mosquito Control

Spring is once again upon us and with spring comes several large storms followed by sunny mild to hot temperatures. Standing water, hot weather, and warm bodies create the perfect storm for Mosquitoes and the West Nile virus they spread. Please visit the Mosquito and Vector Control Association of California to learn how you can help control mosquito populations in your community. The Center for Disease Control and Prevention can provide you the latest national health news.



New Inspection Process Project

As part of the Division's continuous quality improvement efforts, CCLD is currently working on the development of a new inspection tool. Improving the effectiveness and quality of the inspection process includes developing and deploying comprehensive, data-driven inspection tools which is essential to these efforts. CCLD is starting with a pilot of the tools for the Adult and Senior Care (ASC) Program and will subsequently complete tools for the Children's Residential and Child Care programs.

As we prepare to launch the Senior Care Inspection Tool Pilot, we invite you to participate in the process to improve the draft tools and pilot plan by sending your comments and feedback to inspectionprocess@dss.ca.gov by April 15, 2018. This is the first of several opportunities to participate in the shaping of the Senior Care Inspection Tools.

For more information on this project please visit the <u>Inspection Process Project</u> website.

Adult and Senior Care Program Updates

Icela Estrada was appointed to Regional Manager in the San Diego ASC Regional Office, effective January 23, 2018.

Shelley Grace was appointed to Regional Manager in the Orange ASC Regional Office effective March 12, 2018.

Issac Taggart was promoted to Licensing Program Manager I in the Oakland ASC Regional Office effective March 1, 2018.

Wei Seiw Ho was promoted to Licensing Program Manager I in the Monterey Park ASC Regional Office effective March 1, 2018.

Julia Kim was promoted to Staff Services Manager I in the ASC Centralized Applications Bureau effective February 15, 2018.



Are you interested in becoming part of the Community Care Licensing team?

Please apply at: CalCareers website

Links to Adult and Senior Care Program Office Websites:

Adult- http://www.cdss.ca.gov/inforesources/Adult-Care-Licensing Senior- http://www.cdss.ca.gov/inforesources/Senior-Care-Licensing

Centralized Application Unit Website

Remember to check for new PINS

| IMPORTANT PHONE NUMBERS | |
|---|----------------|
| Centralized Complaint Information Bureau (CCIB) | 1-844-538-8766 |
| Administrator Certification | 916-653-9300 |
| Caregiver Background Check Bureau (CBCB) | 1-888-422-5669 |
| Long Term Care Ombudsman | 1-800-231-4024 |
| CCLD Public Inquiry and Response | 916-651-8848 |
| Technical Support Program | 916-654-1541 |
| Centralized Applications Unit | 916-657-2600 |